

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)

SERIAL NO. 10/04808C FILING DATE _____
 APPLICATION NO. _____

CLAIMS

AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.					
TOTAL DEP.	19	19	19	19	19
TOTAL CLAIMS	26	20	20	20	20

IND.	DEP.
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TOTAL IND.	
TOTAL DEP.	
TOTAL CLAIMS	

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MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

PTQ-1360 (3-78)

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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